Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF OKLAHOMA	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for	David First name	_	Jyll First name
	example, your driver's license or passport).	Curt Middle name		Rheannon
	Bring your picture identification to your meeting with the trustee.	McCoy Last name and Suffix (Sr., Jr., II, III)	-	Middle name McCoy Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	·		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7698		xxx-xx-5728

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	4301 Orchard Parkway Muskogee, OK 74403	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Muskogee	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 2 Jyll Rheannon Mc					Case number (if known)
Par	rt 2: Tell the Court About	our Ban	kruptov Ca	ase		
7.	The chapter of the Bankruptcy Code you are	Check o	ne. (For a l	brief description of each	n, see <i>Notice Required by</i> and check the appropria	v 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy te box.
	choosing to file under	■ Char	oter 7			
		☐ Char				
		☐ Char				
		☐ Char				
8.	How you will pay the fee	ab or	out how yo	ou may pay. Typically, i r attorney is submitting y	f you are paying the fee y	ck with the clerk's office in your local court for more details ourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with
				y the fee in installmentee in Installments (Offici		ion, sign and attach the Application for Individuals to Pay
		□ Ir	equest that it is not rec	at my fee be waived (Y quired to, waive your fee	ou may request this option, and may do so only if you	on only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that
						in installments). If you choose this option, you must fill out icial Form 103B) and file it with your petition.
9.	Have you filed for	■ No.				
	bankruptcy within the last 8 years?	☐ Yes.				
	•		District		When	Case number
			District		When	Case number
			District		When	Case number
10.	Are any bankruptcy	■ No				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your residence?	■ No.	Go to	line 12.		
	residence?	☐ Yes.	Has yo	our landlord obtained ar	n eviction judgment again	st you?
				No. Go to line 12.		
				Yes. Fill out <i>Initial Sta</i> this bankruptcy petitio		Judgment Against You (Form 101A) and file it as part of

	tor 1 David Curt McCoy tor 2 Jyll Rheannon Mc			Case number (if known)
Part	3: Report About Any Bu	sinesses	You Own as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of busine	ess
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State 8	& ZIP Code
	it to this petition.		Check the appropriate box to	•
				s (as defined in 11 U.S.C. § 101(27A))
				state (as defined in 11 U.S.C. § 101(51B))
			_ `	ned in 11 U.S.C. § 101(53A))
				as defined in 11 U.S.C. § 101(6))
			☐ None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you indicate that you are a s	art must know whether you are a small business debtor so that it can set appropriate mall business debtor, you must attach your most recent balance sheet, statement of eral income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Chapter	11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11. Code.	but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter 11	and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4: Report if You Own or	Have Any	Hazardous Property or Any F	Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs		If immediate attention is	
	immediate attention?		needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
			N	umber, Street, City, State & Zip Code

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 David Curt McCoy tor 2 Jyll Rheannon Mc			Case num	ber (if known)	
Part	6: Answer These Quest	ions for Re	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily consi		efined in 11 U.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.		ess debts? Business debts are debent or through the operation of the b		
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe	that are not consumer debts or busir	ness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. 0	Go to line 18.		
Do you estimate that after any exempt property is excluded and		■ Yes.		ou estimate that after any exempt proble to distribute to unsecured credito	roperty is excluded and administrative expense rs?	
	administrative expenses are paid that funds will		■ No			
	be available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000	
	you estimate that you owe?	□ 50-99		<u></u> 5001-10,000	<u> </u>	
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000	
19.	How much do you	= \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million	☐ More than \$50 billion	
20.	How much do you estimate your liabilities	□ \$0 - \$5	·	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion	
	to be?	_	01 - \$100,000 001 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion	
			001 - \$3 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion	
Part	:7: Sign Below					
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.				
					ole, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.	
				pay or agree to pay someone who is ortice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this	
		I request	relief in accordance with the chap	oter of title 11, United States Code, s	pecified in this petition.	
			cy case can result in fines up to \$2		y or property by fraud in connection with a 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519	
			d Curt McCoy	/s/ Jyll Rhean		
			urt McCoy of Debtor 1	Jyll Rheanno Signature of Deb		
		Executed	on October 24, 2019 MM / DD / YYYY		October 24, 2019 MM / DD / YYYY	

Debtor 1	David Curt McCoy		
Debtor 2	Jyll Rheannon McCoy	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Patrick G. Guinn Sr.	Date	October 24, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Patrick G. Guinn Sr. 20061		
Printed name		
Guinn Law Office		
Firm name		
904 Erie Street		
Muskogee, OK 74403		
Number, Street, City, State & ZIP Code		
Contact phone 918-269-5147	Email address	pguinnsr@suddenlink.net
20061 OK		
Bar number & State		

Fill is	n this informa	ition to identify your case:		
Debte		David Curt McCoy		
DODE	01 1	First Name Middle Name Last Name		
Debte		Jyll Rheannon McCoy		
(Spous	se if, filing)	First Name Middle Name Last Name		
Unite	d States Bank	ruptcy Court for the: EASTERN DISTRICT OF OKLAHOMA		
Case	number			
(if knov	wn)		_	k if this is an
			amen	ded filing
<u>Offi</u>	cial Forr	<u>n 106Sum</u>		
Sun	nmary of	Your Assets and Liabilities and Certain Statistical Information		12/15
		d accurate as possible. If two married people are filing together, both are equally responsible for It all of your schedules first; then complete the information on this form. If you are filing amend		
		s, you must fill out a new <i>Summary</i> and check the box at the top of this page.	sa soneaa	nes and you me
Part '	1: Summar	ize Your Assets		
				,
			Your a	of what you own
1.	Schodulo A/E	3: Property (Official Form 106A/B)		·
		55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line	62, Total personal property, from Schedule A/B	\$	21,296.38
	1c. Copy line	63, Total of all property on Schedule A/B	\$	21,296.38
			· 	
Part 2	2: Summar	ize Your Liabilities		
				abilities
			Amoun	nt you owe
		Creditors Who Have Claims Secured by Property (Official Form 106D) otal you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	800.00
			· —	
		Creditors Who Have Unsecured Claims (Official Form 106E/F) total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	18,589.48
	.,	,	.	402 044 72
	Sb. Copy the	total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	102,811.72
		Vaur tatal liabilitia	•	400 004 00
		Your total liabilities	a	122,201.20
D1	0	to Verrille and Francisco		
Part 3	3: Summar	ize Your Income and Expenses		
		our Income (Official Form 106I) nbined monthly income from line 12 of Schedule I	\$	4,066.80
5.	Schedule J: Y	our Expenses (Official Form 106J)		
	Copy your mo	nthly expenses from line 22c of Schedule J	\$	3,910.00
Part 4	4: Answer	These Questions for Administrative and Statistical Records		
		for bankruptcy under Chapters 7, 11, or 13? have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other sc	hedules.
7.	■ Yes What kind of	debt do you have?		
		•		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

7,639.66

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	18,589.48
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	18,589.48

Fill in	this inform	nation to identify your	case and this filing:			
Debto	r 1	David Curt McCo	v			
		First Name	Middle Name Last Name			
Debto		Jyll Rheannon M				
Spouse	, if filing)	First Name	Middle Name Last Name			
Jnited	States Bar	kruptcy Court for the:	EASTERN DISTRICT OF OKLAHOMA			
Case i	number				П	Check if this is an
	_				_	amended filing
Offic	cial For	rm 106A/B				
_		A/B: Prop	ertv			12/15
			e items. List an asset only once. If an asset fits in	n more than one category list the	asset in the	
nink it nforma	fits best. Be	as complete and accura space is needed, attach	te as possible. If two married people are filing too a separate sheet to this form. On the top of any a	gether, both are equally responsible	le for supply	ying correct
Part 1:	Describe E	Each Residence, Building	, Land, or Other Real Estate You Own or Have an	Interest In		
. Do y	ou own or h	ave any legal or equitable	e interest in any residence, building, land, or simi	lar property?		
.	o. Go to Part	0				
_						
ЦΥ	es. Where is	the property?				
Part 2:	Describe Y	our Vehicles				
. Car □ N ■ Y	0	icks, tractors, sport u	ility vehicles, motorcycles			
3.1		Chrysler	Who has an interest in the property?	the amount of an	ny secured cla	s or exemptions. Put aims on Schedule D:
	_	300	Debtor 1 only	Creditors Who H	ave Claims S	Secured by Property.
	-	2007	Debtor 2 only			urrent value of the
	Approximate Other inform		Debtor 1 and Debtor 2 only	entire property?	? p	ortion you own?
Г	Other inform	ation:	At least one of the debtors and anothe	∍r		
			Check if this is community property (see instructions)	\$4,00 	0.00	\$4,000.00
3.2	Make: N	lissan	Who has an interest in the property?			s or exemptions. Put
٥.٢		itan PU	Debtor 1 only	the amount of an		aims on <i>Schedule D:</i> Secured by Property.
		2007	Debtor 2 only	Current value of		urrent value of the
	Approximate	mileage: 157	Debtor 1 and Debtor 2 only	entire property?		ortion you own?
-	Other inform	ation:	☐ At least one of the debtors and another	ər		
			☐ Check if this is community property (see instructions)	y \$7,00	0.00	\$7,000.00
	ercraft air	craft motor homes A	TVs and other recreational vehicles, other v	vahialas and appassarias		

Official Form 106A/B Schedule A/B: Property page 1

Debtor Debtor			Case number	(if known)
		the portion you own for all of your entried for Part 2. Write that number here		
Part 3:	Describe Your Perso	nal and Household Items		
		egal or equitable interest in any of the fo	llowing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exa</i> □ N		urnishings ces, furniture, linens, china, kitchenware		
		Household goods and furnishings	for family of 7	\$1,000.00
	mples: Televisions a including cell	nd radios; audio, video, stereo, and digital e phones, cameras, media players, games	quipment; computers, printers, scanners	s; music collections; electronic devices
		4 cell phones, 4 older flatscreen te	levisions, 2 game machines	\$500.00
Exa ■ N	other collection	figurines; paintings, prints, or other artwork ons, memorabilia, collectibles	; books, pictures, or other art objects; sta	amp, coin, or baseball card collections;
Exa	musical instru	graphic, exercise, and other hobby equipme	ent; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
	amples: Pistols, rifles	s, shotguns, ammunition, and related equipr	nent	
		2 Glock pistols - 40 cal.		\$1,000.00
	amples: Everyday cl	othes, furs, leather coats, designer wear, sh	oes, accessories	
		basic clothing for family of 7		\$200.00
■ N □ Y 13. No <i>Ex</i> ■ N	ramples: Everyday je lo 'es. Describe n-farm animals ramples: Dogs, cats, lo	welry, costume jewelry, engagement rings, v	wedding rings, heirloom jewelry, watches	s, gems, gold, silver
ПΥ	es. Describe			

Official Form 106A/B Schedule A/B: Property page 2

	ebtor 1 ebtor 2	David Curt M Jyll Rheanno		oy		Case number (if known	1)
14	. Any ot	her personal and	l housel	hold items you o	did not alre	eady list, including any health aids you did not list	
	■ No						
	☐ Yes.	Give specific info	rmation.				
1						ncluding any entries for pages you have attached	\$2,700.00
		scribe Your Financ					
D	o you ow	vn or have any le	egal or e	quitable interes	t in any of	the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	□ No	oles: Money you h				a safe deposit box, and on hand when you file your pet	ition
						Cash	\$20.00
17	Examp				ınts with th	ertificates of deposit; shares in credit unions, brokerage e same institution, list each. Institution name:	e houses, and other similar
			17.1.	Checking		Bancfirst Muskogee	\$5.00
			17.2.	Checking		Bancfirst Muskogee	\$53.00
18	Examp	, mutual funds, o	investme		brokerage	firms, money market accounts	
19	. Non-pu joint v		ock and	interests in inco	orporated a	and unincorporated businesses, including an intere	est in an LLC, partnership, and
	■ No □ Yes.	Give specific info		about them me of entity:		% of ownership:	
20	Negoti Non-ne	iable instruments	include p	personal checks,	cashiers' c	and non-negotiable instruments checks, promissory notes, and money orders. co someone by signing or delivering them.	
	■ No □ Yes.	Give specific info		about them uer name:			
21		ment or pension oles: Interests in II			s), 403(b), t	hrift savings accounts, or other pension or profit-sharin	g plans
	■ Yes.	List each account		tely. of account:	ı	Institution name:	
			Thrift	t Saving	_!	Federal Thrift Savings Plan	\$1,241.38

Official Form 106A/B Schedule A/B: Property page 3

Pension

Federal Employees Retirment System (FERS)

\$6,277.00

22.	Examples: Agreement	d prepayments ed deposits you have made so that you may continue ts with landlords, prepaid rent, public utilities (electric,		or others
	■ No □ Yes	Institution name	or individual:	
23.	Annuities (A contract	for a periodic payment of money to you, either for life of	or for a number of years)	
	☐ Yes	ssuer name and description.		
24.		ion IRA, in an account in a qualified ABLE program, 529A(b), and 529(b)(1).	n, or under a qualified state tuition progra	m.
	☐ YesI	nstitution name and description. Separately file the rec	cords of any interests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or fo	uture interests in property (other than anything list	ted in line 1), and rights or powers exercis	sable for your benefit
	☐ Yes. Give specific in	formation about them		
26.		trademarks, trade secrets, and other intellectual pr main names, websites, proceeds from royalties and lid		
	☐ Yes. Give specific in	nformation about them		
27.		and other general intangibles ermits, exclusive licenses, cooperative association hold	dings, liquor licenses, professional licenses	
	☐ Yes. Give specific in	formation about them		
M	oney or property owed	to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to	you		
	■ No □ Yes. Give specific in	formation about them, including whether you already f	iled the returns and the tax years	
29.	Family support Examples: Past due o No Yes. Give specific in:	r lump sum alimony, spousal support, child support, m	naintenance, divorce settlement, property set	tlement
20				
30.		one owes you ges, disability insurance payments, disability benefits, npaid loans you made to someone else	sick pay, vacation pay, workers' compensat	ion, Social Security
	Examples: Unpaid was benefits; u	ges, disability insurance payments, disability benefits, npaid loans you made to someone else	sick pay, vacation pay, workers' compensat	ion, Social Security
	Examples: Unpaid wabenefits; u ■ No □ Yes. Give specific in Interests in insurance	ges, disability insurance payments, disability benefits, npaid loans you made to someone else		ion, Social Security
31.	Examples: Unpaid wabenefits; u ■ No □ Yes. Give specific in Interests in insurance Examples: Health, dis	ges, disability insurance payments, disability benefits, npaid loans you made to someone else information		ion, Social Security Surrender or refund value:

Official Form 106A/B Schedule A/B: Property page 4

Case 19-81230 Doc 1

Debtor 1 Debtor 2	David Curt McCoy Jyll Rheannon McCoy Case number (if known)	vn)
If you a some of	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to ne has died. Give specific information	eceive property because
Examp ■ No	against third parties, whether or not you have filed a lawsuit or made a demand for payment les: Accidents, employment disputes, insurance claims, or rights to sue	
34. Other o	contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights Describe each claim	s to set off claims
■ No	ancial assets you did not already list Give specific information	
	he dollar value of all of your entries from Part 4, including any entries for pages you have attached art 4. Write that number here	\$7,596.38
Part 5: De	scribe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you (own or have any legal or equitable interest in any business-related property?	
■ No. Go	to Part 6.	
☐ Yes. 0	o to line 38.	
	scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. but own or have an interest in farmland, list it in Part 1.	
46. Do yo u	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
■ No.	Go to Part 7.	
☐ Yes	Go to line 47.	
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
	have other property of any kind you did not already list? les: Season tickets, country club membership	
	Give specific information	
54. Add t	he dollar value of all of your entries from Part 7. Write that number here	\$0.00

David Curt McCoy Debtor 1 Debtor 2 Jyll Rheannon McCoy

Case number (if known)

Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$11,000.00		
57.	Part 3: Total personal and household items, line 15		\$2,700.00		
58.	Part 4: Total financial assets, line 36		\$7,596.38		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$21,296.38	Copy personal property total	\$21,296.38
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$21,296.38

ation to identify your	case:		
First Name	Middle Name	Last Name	
Jyll Rheannon Mo	Соу		
First Name	Middle Name	Last Name	
kruptcy Court for the:	EASTERN DISTRICT O	F OKLAHOMA	
			☐ Check if this is an amended filing
	David Curt McCog First Name Jyll Rheannon Mo First Name	Jyll Rheannon McCoy First Name Middle Name	David Curt McCoy First Name Middle Name Last Name Jyll Rheannon McCoy First Name Middle Name Last Name

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Cla	aim as Exempt
---------------------------------------	---------------

Pa	rt 1: Identify the Property You Claim as E	exempt			
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.	
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	s.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 l	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	2007 Chrysler 300 195000 miles Line from Schedule A/B: 3.1	\$4,000.00		\$4,000.00	Okla. Stat. tit. 31, § 1(A)(13)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2007 Nissan Titan PU 157000 miles Line from Schedule A/B: 3.2	\$7,000.00	•	\$7,000.00	Okla. Stat. tit. 31, § 1(A)(13)
	Line Holli Schedule A/B. 3.2			100% of fair market value, up to any applicable statutory limit	

Line from Schedule A/B: 11.1

basic clothing for family of 7

Line from Schedule A/B: 6.1

2 Glock pistols - 40 cal.

Line from Schedule A/B: 10.1

family of 7

Official Form 106C

Okla. Stat. tit. 31, § 1(A)(3)

Okla. Stat. tit. 31, § 1(A)(14)

Okla. Stat. tit. 31, § 1(A)(7)

Desc Main

\$1.000.00

\$1,000.00

\$200.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$1,000.00

\$1,000.00

\$200.00

Household goods and furnishings for

David Curt McCoy Debtor 1 Jyll Rheannon McCoy Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash Okla. Stat. tit. 12, § 1171.1; \$20.00 \$20.00 Line from Schedule A/B: 16.1 Okla. Stat. tit. 31, § 1(A)(18) 100% of fair market value, up to any applicable statutory limit **Checking: Bancfirst** Okla. Stat. tit. 12, § 1171.1; \$5.00 \$5.00 Muskogee Okla. Stat. tit. 31, § 1(A)(18) Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking: Bancfirst** Okla. Stat. tit. 12, § 1171.1; \$53.00 \$53.00 Muskogee Okla. Stat. tit. 31, § 1(A)(18) Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **Thrift Saving: Federal Thrift Savings** Okla. Stat. tit. 31, § 1(A)(22) \$1,241.38 \$1,241.38 Plan Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **Pension: Federal Employees** Okla. Stat. tit. 74, § 923 \$6 277 00 \$6,277,00

	Retirment System (FERS)	Ψ0,277.00		Ψ0,211.00
	Line from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every	. ,		ed on or after the date of adjustment.)
	No			
	☐ Yes. Did you acquire the property cove☐ No☐ Yes	red by the exemption withi	in 1,	215 days before you filed this case?

Document

Fill	in this information	to identify you	r case:				
Deb	tor 1 Day	vid Curt McC	ov				
		Name	Middle Name Last Name				
		I Rheannon N	•				
(Spot	use if, filing) First	Name	Middle Name Last Name				
Unit	ed States Bankruptc	cy Court for the:	EASTERN DISTRICT OF OKLAHOMA				
Cas	e number						
(if kno					☐ Check	if this is a	ın
					ameno	led filing	
∩ffi	cial Form 106	SD.					
			Who Llove Claims Secure	d by Droporty			40/45
<u> </u>	nedule D: C	realtors	Who Have Claims Secure	a by Property	<u> </u>		12/15
is nee	eded, copy the Addition per (if known).	onal Page, fill it o	f two married people are filing together, both are eout, number the entries, and attach it to this form. C				
	any creditors have cl	•	, , , ,				
	☐ No. Check this bo	ox and submit th	nis form to the court with your other schedules. Y	ou have nothing else to	report on this form.		
	Yes. Fill in all of the	he information b	pelow.				
Part	1: List All Secu	red Claims					
			nore than one secured claim, list the creditor separatel		Column B	Column	
			a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecu portion If any	red
2.1	Red River Credi	it Corp	Describe the property that secures the claim:	\$800.00	\$7,000.00	ii diriy	\$0.00
	Creditor's Name		2007 Nissan Titan PU 157000 miles				
	520 N. Main Stre	eet	As of the date you file, the claim is: Check all that				
	Muskogee, OK		apply. Contingent				
	Number, Street, City, Sta	ate & Zip Code	☐ Unliquidated				
			☐ Disputed				
Who	owes the debt? Che	eck one.	Nature of lien. Check all that apply.				
	ebtor 1 only		■ An agreement you made (such as mortgage or se	cured			
	ebtor 2 only		car loan)				
	ebtor 1 and Debtor 2 o	only	☐ Statutory lien (such as tax lien, mechanic's lien)				
	t least one of the debto		☐ Judgment lien from a lawsuit				
	check if this claim rela community debt	ates to a	Other (including a right to offset)				
Date	debt was incurred	2018	Last 4 digits of account number 7698				
	=		olumn A on this page. Write that number here:	\$800	0.00		
	his is the last page of ite that number here:		the dollar value totals from all pages.	\$800	0.00		
			r a Doht That You Already Listed	,			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Fill in this information to identify your case:					
Debtor 1 David Curt McCoy					
	ddle Name Last Name	9			
Debtor 2 Jyll Rheannon McCoy					
(Spouse if, filing) First Name Mi	ddle Name Last Name	Э			
United States Bankruptcy Court for the: EASTE	ERN DISTRICT OF OKLAHOMA				
Case number					
(if known)				☐ Chec	ck if this is an
				ame	nded filing
Official Form 106E/F Schedule E/F: Creditors Who Ha	ave Unsecured Claim	S			12/15
Schedule D: Creditors Who Have Claims Secured by P left. Attach the Continuation Page to this page. If you hame and case number (if known). Part 1: List All of Your PRIORITY Unsecured	nave no information to report in a Pa				
Do any creditors have priority unsecured claims a	against you?				
☐ No. Go to Part 2.					
■ Yes.					
 List all of your priority unsecured claims. If a cred identify what type of claim it is. If a claim has both prioring possible, list the claims in alphabetical order according Part 1. If more than one creditor holds a particular claim. 	ority and nonpriority amounts, list that on ng to the creditor's name. If you have m	laim here ar	nd show both priority a	nd nonpriority amo	unts. As much as
(For an explanation of each type of claim, see the ins	tructions for this form in the instruction	booklet.)			
			Total claim	Priority amount	Nonpriority amount
Oklahom Tax Commission	Last 4 digits of account number	1536	\$477.48	\$477.4	
				¥	8 \$0.00
Priority Creditor's Name	W/h and come the stable in account do	2042			8 \$0.00
2501 North Lincoln	When was the debt incurred?	2013			<u>\$0.00</u>
•	When was the debt incurred? As of the date you file, the claim		Il that apply		<u>8 \$0.00</u>
2501 North Lincoln Oklahoma City, OK 73194	As of the date you file, the claim		ll that apply		.8 \$0.00
2501 North Lincoln Oklahoma City, OK 73194 Number Street City State Zip Code	As of the date you file, the claim ☐ Contingent —		ll that apply		.8 \$0.00
2501 North Lincoln Oklahoma City, OK 73194 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim Contingent Unliquidated		ll that apply		.8 \$0.00
2501 North Lincoln Oklahoma City, OK 73194 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	As of the date you file, the claim ☐ Contingent —	is: Check a	ll that apply		.8 \$0.00
2501 North Lincoln Oklahoma City, OK 73194 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	As of the date you file, the claim Contingent Unliquidated Disputed	is: Check a	ll that apply	•	.8 \$0.00
2501 North Lincoln Oklahoma City, OK 73194 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	As of the date you file, the claim Contingent Unliquidated Disputed Type of PRIORITY unsecured cla	is: Check a		•	.8 \$0.00

■ No ☐ Yes Other. Specify

State Income Tax

Jyll Rheannon McCoy		Case num	ber (if known)		
Social Security Administration	Last 4 digits of account number	2601	\$18,112.00	\$0.00	\$18,112.00
Priority Creditor's Name Mid-America Program Service	When was the debt incurred?	Jan 2019			
Center		<u> </u>			
601 East Twelfth					
Kansas City, MO 64106 Number Street City State Zip Code	As of the date you file, the claim	is: Check all th	at annly		
Vho incurred the debt? Check one.	Contingent	Onook an an	ат аррту		
Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
•	Type of PRIORITY unsecured cla	im:			
Debtor 1 and Debtor 2 only	☐ Domestic support obligations				
At least one of the debtors and another	_				
Check if this claim is for a community debt	■ Taxes and certain other debts y	-			
the claim subject to offset?	Claims for death or personal inj	ury while you w	ere intoxicated		
No Yes	Other. Specify	verpaymer	-1		
Tes	uisability (verpaymen	IL		
any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit	ns against you?	chedules.			
o any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. St all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each can one creditor holds a particular claim, list the other	this form to the court with your other stall the stall that the court with your other stall the stall that the creditor laim. For each claim listed, identify with the creditor laim.	who holds eac at type of claim	it is. Do not list claims al	Iready included in	Part 1. If more
List All of Your NONPRIORITY Unsecute of any creditors have nonpriority unsecured claim. No. You have nothing to report in this part. Submit Yes. Set all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2.	this form to the court with your other stall the stall that the court with your other stall the stall that the creditor laim. For each claim listed, identify with the creditor laim.	who holds eac at type of claim	it is. Do not list claims al	Iready included in	Part 1. If more ation Page of
any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. all of your nonpriority unsecured claims in the ecured claim, list the creditor separately for each content on one creditor holds a particular claim, list the other	this form to the court with your other stall the stall that the court with your other stall the stall that the creditor laim. For each claim listed, identify with the creditor laim.	who holds eac at type of claim nan three nonp	it is. Do not list claims al	Iready included in ill out the Continua	Part 1. If more ation Page of
Any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. all of your nonpriority unsecured claims in the ecured claim, list the creditor separately for each c a one creditor holds a particular claim, list the other 2. A, T & T Mobility Nonpriority Creditor's Name	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify where the creditors in Part 3.If you have more to the cast 4 digits of account numbers.	who holds eac lat type of claim nan three nonp er 4473	n it is. Do not list claims al riority unsecured claims f	Iready included in ill out the Continua	Part 1. If more ation Page of
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A, T & T Mobility No. You have nothing to report in this part. Submit Yes. A, T & T Mobility No. You have nothing to report in this part. Submit Yes. A, T & T Mobility Nonpriority Creditor's Name	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify where the creditors in Part 3.If you have more to the cast 4 digits of account numbers.	who holds eac at type of claim nan three nonp er 4473 Feb 20	n it is. Do not list claims al riority unsecured claims f	Iready included in ill out the Continua	Part 1. If more ation Page of
any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. It all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each c n one creditor holds a particular claim, list the other at 2. A, T & T Mobility Nonpriority Creditor's Name PO Box 537104 Atlanta, GA 30353	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify when creditors in Part 3.If you have more to the cast 4 digits of account number when was the debt incurred?	who holds eac at type of claim nan three nonp er 4473 Feb 20	n it is. Do not list claims al riority unsecured claims f	Iready included in ill out the Continua	Part 1. If more ation Page of
A, T & T Mobility Non your foreity unsecured claim, list the other to 2. A, T & T Mobility Nonpriority Creditor's Name PO Box 537104 Atlanta, GA 30353 Number Street City State Zip Code	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify we creditors in Part 3.If you have more to be a count number of the creditors in Part 3.If you have more to be a count number of the creditors of the date you file, the claim of the count of the count number of t	who holds eac at type of claim nan three nonp er 4473 Feb 20	n it is. Do not list claims al riority unsecured claims f	Iready included in ill out the Continua	Part 1. If more ation Page of
A, T & T Mobility Nonpriority Creditor's Name PO Box 537104 Atlanta, GA 30353 Number Street City State Zip Code Who incurred the debt? Check one.	this form to the court with your other stalphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to be a count number of the was the debt incurred? As of the date you file, the claim countingent	who holds eac at type of claim nan three nonp er 4473 Feb 20	n it is. Do not list claims al riority unsecured claims f	Iready included in ill out the Continua	Part 1. If more ation Page of
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Any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. It all of your nonpriority unsecured claims in the ecured claim, list the creditor separately for each can one creditor holds a particular claim, list the other to 2. A, T & T Mobility Nonpriority Creditor's Name PO Box 537104 Atlanta, GA 30353 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only	this form to the court with your other stalphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to be a count number of the was the debt incurred? As of the date you file, the claim countingent	who holds eac lat type of claim nan three nonp er 4473 Feb 20 im is: Check al	n it is. Do not list claims al riority unsecured claims f	Iready included in ill out the Continua	Part 1. If more ation Page of
A, T & T Mobility Non You bave nothing to report in this part. Submit Yes. It all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each on one creditor holds a particular claim, list the other t 2. A, T & T Mobility Nonpriority Creditor's Name PO Box 537104 Atlanta, GA 30353 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	this form to the court with your other stalphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to a Last 4 digits of account numbers. Last 4 digits of account numbers. When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed	who holds eac lat type of claim nan three nonp er 4473 Feb 20 im is: Check al	n it is. Do not list claims al riority unsecured claims f	Iready included in ill out the Continua	Part 1. If more ation Page of
A, T & T Mobility Nonpriority Creditor's Name PO Box 537104 Atlanta, GA 30353 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other stalphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to be a count number of the was the debt incurred? As of the date you file, the claim count in the clai	who holds eac at type of claim nan three nonp er 4473 Feb 20 im is: Check al	n it is. Do not list claims al riority unsecured claims f	Iready included in ill out the Continua Total c	Part 1. If more ation Page of
A, T & T Mobility Non You bave nothing to report in this part. Submit Yes. It all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each on one creditor holds a particular claim, list the other to 2. A, T & T Mobility Nonpriority Creditor's Name PO Box 537104 Atlanta, GA 30353 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community	this form to the court with your other stalphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to creditors in Part 4.If you have more to credito	who holds eac at type of claim nan three nonp er 4473 Feb 20 im is: Check al	n it is. Do not list claims al riority unsecured claims f	Iready included in ill out the Continua Total c	Part 1. If more ation Page of
A, T & T Mobility Nonpriority Creditor's Name PO Box 537104 Atlanta, GA 30353 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other stalphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to be a count number of the was the debt incurred? As of the date you file, the claim count in the clai	who holds eac at type of claim nan three nonp er 4473 Feb 20 im is: Check al ured claim: eparation agree aring plans, and	n it is. Do not list claims al riority unsecured claims f	Iready included in ill out the Continua Total c	Part 1. If more ation Page of

Debto Debto	or 1 David Curt McCoy Dr 2 Jyll Rheannon McCoy		Case number (if known)		
4.2	Acceptance Now	Last 4 digits of account number	5819	\$6,047.00	
	Nonpriority Creditor's Name 5501 Headquaters Dr Plano, TX 75024	When was the debt incurred?	Feb 2015		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify collection f	or medical treatment		
4.3	Acima Credit	Last 4 digits of account number	48	\$1,991.00	
	Nonpriority Creditor's Name 9815 S. Monroe Street, 4th Floor Sandy, UT 84070	When was the debt incurred?	June 2017		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify collection f Francis Mu	or medical treatment at Saint skogee		
4.4	AFNI	Last 4 digits of account number	8901	\$564.36	
	Nonpriority Creditor's Name PO Box 3517 Bloomington, IL 61702	When was the debt incurred?	April 2018		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	□Yes	■ Other Specify Collection	or A. T & T		
	30	- Other, Specify			

Debtor Debtor	1 David Curt McCoy 2 Jyll Rheannon McCoy		Case number (if known)	
4.5	Approved Cash Advance Nonpriority Creditor's Name	Last 4 digits of account number	7698	\$251.50
	2238 Shawnee Blvd Muskogee, OK 74403	When was the debt incurred?	Sep 2011	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify personal lo	an	
4.6	Approved Cash Advance.2	Last 4 digits of account number	5728	\$838.46
	Nonpriority Creditor's Name 2238 Shawnee Blvd Muskogee, OK 74403	When was the debt incurred?	Sep 2011	
	Number Street City State Zip Code	As of the date you file, the claim i		
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify personal lo	an	
4.7	ARSTRAT, LLC Nonpriority Creditor's Name	Last 4 digits of account number	0814	\$148.49
	PO Box 790113 Saint Louis, MO 63179	When was the debt incurred?	July 2018	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other. Specify collection f	- •	
	□ res	Other. Specify	oi inedical deadiletti	

	or 2 Jyll Rheannon McCoy	Case number (if known)			
4.8	Arvest Bank	Last 4 digits of account number 4612	\$351.83		
	Nonpriority Creditor's Name PO Box 1670 Lowell, AR 72745	When was the debt incurred? July 2019			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Bank charges			
	163	Citier. Specify			
4.9	Auto Advantage Finance	Last 4 digits of account number 8705	\$9,914.43		
	Nonpriority Creditor's Name PO Box 96329	When was the debt incurred? Aug 2017			
	Oklahoma City, OK 73143 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	Поло			
	Debtor 2 only	☐ Contingent			
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated			
	<u> </u>	☐ Disputed Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify CX-7			
4.1 0	City of Muskogee (American Municipal Ser	Last 4 digits of account number 5216	\$99.34		
	Nonpriority Creditor's Name PO Box 118312	When was the debt incurred? Nov. 2011	<u> </u>		
	Carrollton, TX 75011				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one. ☐ Debtor 1 only				
	Debtor 2 only	☐ Contingent			
	<u> </u>	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify utilities			

Debto Debto	r 1 David Curt McCoy T 2 Jyll Rheannon McCoy	Case number (if known)		
4.1	CMRE Financial Services, Inc.	Last 4 digits of account number	5617	\$1,658.49
	Nonpriority Creditor's Name 3075 Imperial Hwy, Ste. 200 Brea, CA 92821-6753	When was the debt incurred?	July 2018	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify collection f	or medical treatment	
4.1	Commerce Finance	Last 4 digits of account number	7698	\$424.00
	Nonpriority Creditor's Name 907A N. York Street Muskogee, OK 74403	When was the debt incurred?	March 2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify money loan	1	
4.1	Commerce Finance.2	Last 4 digits of account number	5728	\$292.00
	Nonpriority Creditor's Name 907A N. York Street Muskogee, OK 74403	When was the debt incurred?	March 2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	□ Yes	Other Specify money loan	1	

\$391.10
not
\$2,825.43
not
\$1,535.00
not
id

GLOBAL RECEIVABLES SOLUTIONS	Last 4 digits of account number53	353	\$242.96
Nonpriority Creditor's Name PO BOXD 790113 Saint Louis, MO 63179	When was the debt incurred?	an 2018	
Number Street City State Zip Code Nho incurred the debt? Check one.	As of the date you file, the claim is: C	heck all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured cla	im:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separatio report as priority claims	n agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing pla	ans, and other similar debts	
☐Yes	Collections for Francis Musko	r Medical treatment at Saint ogee	
Globe Acceptance	Last 4 digits of account number 00	077	\$19,758.00
Nonpriority Creditor's Name 3410 Merle Hay Road Des Moines, IA 50310	When was the debt incurred?	pril 2014	
Number Street City State Zip Code	As of the date you file, the claim is: C	heck all that apply	
Who incurred the debt? Check one.	• ,		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured cla	im:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separatio report as priority claims	n agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing pla	ans, and other similar debts	
☐ Yes	debt on repose Silverado	sessed vehicle - Chevy	
GM Financial	Last 4 digits of account number 50	089	\$11,842.58
Nonpriority Creditor's Name PO Box 182963	When was the debt incurred?	une 2015	
Arlington, TX 76096 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: C	heck all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured cla	im:	
☐ Check if this claim is for a community	☐ Student loans		
s the claim subject to offset?	☐ Obligations arising out of a separatio report as priority claims	n agreement or divorce that you did not	
No	Debts to pension or profit-sharing pla	ans, and other similar debts	
		Repossessed Chevy	

72 Jyll Rheannon McCoy		Case number (if known)	
GREEN COUNTRY EMERG PHYS GROUP TULSA	Last 4 digits of account number	0032	\$1,653.78
Nonpriority Creditor's Name PO Box 21050, Dept 201 Tulsa, OK 74121	When was the debt incurred?	July 2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify medical tre	eatment	
John Belk, MD	Last 4 digits of account number	0520	\$420.69
Nonpriority Creditor's Name 1103 W. Cherokee Wagoner, OK 74467	When was the debt incurred?	Dec. 2017	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify medical tre	eatment	
Medical Billing Solutions	Last 4 digits of account number	1912	\$97.87
Nonpriority Creditor's Name PO Box 1919	When was the debt incurred?	March 2019	
Tulsa, OK 74101 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	Other, Specify collection f	for medical	

	or 1 David Curt McCoy or 2 Jyll Rheannon McCoy	Case number (if known)		
4.2 3	Medical Revenue Service	Last 4 digits of account number	1650	\$178.98
	Nonpriority Creditor's Name PO Box 1149 Sobring El 23874	When was the debt incurred?	Jan. 2018	
	Sebring, FL 33871 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Collection	for medical treatment	
4.2 4	Medicare Premium Collection Center	Last 4 digits of account number	RE29	\$1,487.50
	Nonpriority Creditor's Name PO Box 790355 Saint Louis, MO 63179	When was the debt incurred?	Jan 2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify collection f	or medical	
4.2 5	Nehemiah Homes	Last 4 digits of account number	7698	\$1,110.00
	Nonpriority Creditor's Name 806 N. 24th Street Muskogee, OK 74401	When was the debt incurred?	Nov 2013	
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	3	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other, Specify rent debt		

2 Jyll Rheannon McCoy		Case number (if known)	
Nelnet	Last 4 digits of account number	7314	\$3,188.00
Nonpriority Creditor's Name PO Box 82561 Lincoln, NE 68501	When was the debt incurred?	Sep 2014	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Student loa	ans	
NPAPS, INC/EASTSTAR	Last 4 digits of account number	2249	\$450.85
Nonpriority Creditor's Name PO BOX 740757	When was the debt incurred?	June 2016	
Cincinnati, OH 45274			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify medical tre	eatment	
RECEIVABLE MANAGEMENT		AUFFOW	** ** ** * * * * * *
GROUP INC Nonpriority Creditor's Name	Last 4 digits of account number	AHFFCW	\$142.00
2901 University Ave. #29 Columbus, GA 31907	When was the debt incurred?	July 2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing		
☐ Yes	Other Specify collection f	for medical treatment	

	or 1 David Curt McCoy or 2 Jyll Rheannon McCoy	Case number (if known)		
4.2 9	Regional Acceptance Co.	Last 4 digits of account number	6688	\$23,759.00
	Nonpriority Creditor's Name 9636 N. May Street, Ste. 200 Oklahoma City, OK 73120	When was the debt incurred?	Oct 2014	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify collection f Muskogee	or medical treatment at Regional	
4.3	Saint Francis Health Systems	Last 4 digits of account number	7137	\$2,379.17
	Nonpriority Creditor's Name PO Box 707001 Tulsa, OK 74170-7001	When was the debt incurred?	April 2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify medical tre	atment	
4.3	Silverscript Insurance Company Nonpriority Creditor's Name	Last 4 digits of account number	3317	\$120.80
	PO Box 504849 Saint Louis, MO 63150	When was the debt incurred?	April 2019	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another			
	☐ Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	iration agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other Specify collection f	or medical	
		- Guion opoony		

0		0.450	* 40 00
Spectrum Imaging PLLC Nonpriority Creditor's Name	Last 4 digits of account number	8456	\$40.00
PO Box 21228, Dept. 130 Tulsa, OK 74121-1228	When was the debt incurred?	Jan. 2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify medical tre	patment	
Sun Loans	Last 4 digits of account number	5728	\$170.00
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ170.00
2421 S. York Street, Ste. 6 Muskogee, OK 74403	When was the debt incurred?	April 2013	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify money loan	1	
Tab Services	Last 4 digits of account number	1400	\$81.00
Nonpriority Creditor's Name			Ψ01100
2448 E. 81st Street, Ste. 4700 PO Box 52039	When was the debt incurred?	May 2016	
Tulsa, OK 74152-0039 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	7.5 of the date you me, the claim.	or chock all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes		for medical treatment from Dr. er of Muskogee, OK - no longer	

	Jyll Rheannon McCoy		Case number (if known)	
4.3 5	US Cellular	Last 4 digits of account number	2069	\$529.02
<u> </u>	Nonpriority Creditor's Name C/O Debt Recovery Solutions 900 Merchants Concourse Westbury, NY 11590	When was the debt incurred?	Sep 2016	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	<u> </u>	Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No □ Yes	·		
	La res	Other. Specify Trade debt		-
4.3 6	Works & Lentz	Last 4 digits of account number	3473	\$6,513.92
	Nonpriority Creditor's Name 1437 s Boulder stse s900 Tulsa, OK 74119	When was the debt incurred?	Jan. 2019	-
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	collection f Other. Specify Francis	or medical treatment - Saint	
				-
5. Use t is try have notifi	List Others to Be Notified About a D this page only if you have others to be notified ring to collect from you for a debt you owe to so more than one creditor for any of the debts the ied for any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt that your bankruptcy, for a debt that you make the original creditor in the fact you listed in Parts 1 or 2, list the addition or submit this page.	Parts 1 or 2, then list the collection agence tional creditors here. If you do not have ad	y here. Similarly, if you
Name a	and Address & T	On which entry in Part 1 or Part 2 did you Line 4.4 of (<i>Check one</i>):	list the original creditor? Part 1: Creditors with Priority Unsecured Cla	lm a
	ox 5014		Part 2: Creditors with Nonpriority Unsecured	
Carol	Stream, IL 60197	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured	Claims
Nama	and Address	On which entry in Part 1 or Part 2 did you		
	nced Collection	· · · · · · · · · · · · · · · · ·	Part 1: Creditors with Priority Unsecured Cla	ims
_	ox 560063		Part 2: Creditors with Nonpriority Unsecured	
Rock	ledge, FL 32956	Last 4 digits of account number	7698	
	and Address	On which entry in Part 1 or Part 2 did you	_	
AFNI PO B	ox 3517		Part 1: Creditors with Priority Unsecured Cla	
	mington, IL 61702	•	Part 2: Creditors with Nonpriority Unsecured	Claims
	<u> </u>	Last 4 digits of account number	9301	
Name a	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 14 of 17

Official Form 106 E/F

Debtor 1 David Curt McCoy Debtor 2 Jyll Rheannon McCoy		Case number (if known)
Capital Accounts PO Box 140065 Nashville, TN 37214	Line 4.16 of (<i>Check one</i>):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
nashville, TN 37214	Last 4 digits of account number	4792
Name and Address City of Muskogee City Hall Muskogee, OK 74402	On which entry in Part 1 or Part 2 did Line 4.10 of (Check one):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
musicogec, on 14402	Last 4 digits of account number	5216
Name and Address Credence Resource Management LLC PO Box 2390	On which entry in Part 1 or Part 2 did Line 4.1 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Southgate, MI 48195	Last 4 digits of account number	4473
Name and Address EOS CCA 700 Longwater Drive Norwell, MA 02061	On which entry in Part 1 or Part 2 did Line 4.30 of (Check one): Last 4 digits of account number	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims 7137
Name and Address EOS CCA PO Box 981008 Boston, MA 02298	On which entry in Part 1 or Part 2 did Line 4.30 of (Check one): Last 4 digits of account number	
Name and Address ERC PO Box 57547 Jacksonville, FL 32241	On which entry in Part 1 or Part 2 did Line 4.4 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 8901
Name and Address Muskogee Regional Medical Center PO Box 290429 Nashville, TN 37229	On which entry in Part 1 or Part 2 did Line 4.29 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 6688
Name and Address Muskogee Regional Medical Center PO Box 740757 Cincinnati, OH 45274	On which entry in Part 1 or Part 2 did Line 4.29 of (Check one): Last 4 digits of account number	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims 6688
Name and Address Portfolio Recovery Associates, LLC PO Box 12914 Norfolk, VA 23541	On which entry in Part 1 or Part 2 did Line 4.14 of (Check one): Last 4 digits of account number	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
		9132
Name and Address Robinson, Hoover and Fudge 119 N. Robinson, Ste. 1000 Oklahoma City, OK 73102	On which entry in Part 1 or Part 2 did Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	3402,unty
Name and Address Saint Francis Health Systems PO Box 707001 Tulsa, OK 74170-7001	On which entry in Part 1 or Part 2 did Line 4.17 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	5353

On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 David Curt McCoy Debtor 2 Jyll Rheannon McCoy		Case number (if known)	
Saint Francis Hospital Muskogee	Line 4.30 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
300 Rockefeller Drive		Part 2: Creditors with Nonpriority Unsecured Claims	
Muskogee, OK 74401	Last 4 digits of account number	7698	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Saint Francis Hospital Muskogee	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 290429 Nashville, TN 37229-0429		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Nasiiville, 114 37225-0425	Last 4 digits of account number	48	
Name and Address	On which entry in Part 1 or Part 2 d		
Southwest Credit Systems, LP	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 650543 Dallas, TX 75265		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Danas, TX 75205	Last 4 digits of account number	8901	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Sun Loans	Line 4.33 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
361 S. Frontage Road Pahrump, NV 89048		■ Part 2: Creditors with Nonpriority Unsecured Claims	
ramump, NV 05040	Last 4 digits of account number	5728	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
US Cellular	Line 4.35 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
Dept 0205 Palatine, IL 60055		■ Part 2: Creditors with Nonpriority Unsecured Claims	
raiatille, iL 00055	Last 4 digits of account number	2069	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Vengroff Williams, Inc.	Line 4.19 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 4155 Sarasota, FL 34230		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Sarasota, i E 34230	Last 4 digits of account number	5089	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Vital Recovery Services	Line 4.19 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 923748 Norcross, GA 30010		■ Part 2: Creditors with Nonpriority Unsecured Claims	
110101033, OA 00010	Last 4 digits of account number	0198	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 18,589.48
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 18,589.48
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6a.	Obligations arising out of a separation agreement or divorce that		
HOIII FAIT 2	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 102,811.72

Debtor 1 David Curt McCoy
Debtor 2 Jyll Rheannon McCoy

Case number (if known)

Total Nonpriority. Add lines 6f through 6i.

6j. 102,811.72

Fill in this inform	ation to identify your	case:			
Debtor 1	David Curt McCoy	y			
	First Name	Middle Name	Last Name		
Debtor 2	Jyll Rheannon Mo	Coy			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	EASTERN DISTRICT O	F OKLAHOMA		
Case number				_	Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code				State what the contract or lease is for
.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.3	,				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4	,				
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	City		Olalo	ZII OOGC	
-	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

Debtor 1	David Curt McCo	v			
···	First Name	Middle Name	Last Name		
Debtor 2	Jyll Rheannon Mo				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT	OF OKLAHOMA		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official F	Form 106H				
	le H: Your Cod	obtors			40/4 F
JUILGUUI	en. Toul Cou	CDIOI 2			12/15
■ No	I have any codebtors? (If y	you are filing a joint case,	, do not list either spouse	e as a codebtor.	
☐ Yes					
	California, Idaho, Louisiana,				states and territories include
☐ Yes. Di	id your spouse, former spou	use, or legal equivalent liv	ve with you at the time?		
in line 2 a	ngain as a codebtor only i iD), Schedule E/F (Official	f that person is a guara	ntor or cosigner. Make	sure you have listed the	with you. List the person show creditor on Schedule D (Officia chedule E/F, or Schedule G to f
	umn 1: Your codebtor e, Number, Street, City, State and ZI	P Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
Nam	ne			☐ Schedule E/F, line	 e
				☐ Schedule G, line	
Num City	ber Street	State	ZIP Code	_	
3.2				☐ Schedule D, line	
Nam	ne			☐ Schedule E/F, line	 e
				☐ Schedule G, line	
Num	ber Street			_	

Schedule H: Your Codebtors

Del	otor 1 David Cur	МсСоу		
	otor 2 Jyll Rhear	non McCoy		
Uni	ted States Bankruptcy Court for t	ne: EASTERN DISTRICT	OF OKLAHOMA	
_	se number nown)		-	Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:
0	fficial Form 106I			MM / DD/ YYYY
	chedule I: Your In	nomo		MM / DD/ YYYY 12/
Be a sup spo atta	as complete and accurate as popularies or recting as popularies. If you are separated and you are separated an	ssible. If two married pec u are married and not fili our spouse is not filing w i. On the top of any additi	ng jointly, and your spouse is li ith you, do not include informat	and Debtor 2), both are equally responsible for ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question
Be a sup spo atta	as complete and accurate as populying correct information. If you are separated and you have a separated sheet to this form	ssible. If two married pec u are married and not fili our spouse is not filing w i. On the top of any additi	ng jointly, and your spouse is li ith you, do not include informat ional pages, write your name ar	and Debtor 2), both are equally responsible for ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question
Be a sup spo atta	as complete and accurate as popularly property of the popular of t	ssible. If two married pec u are married and not fili our spouse is not filing w i. On the top of any additi	ng jointly, and your spouse is li ith you, do not include informational pages, write your name ar Debtor 1	and Debtor 2), both are equally responsible for ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse
Be a sup spo atta	as complete and accurate as poplying correct information. If you are separated and you are separated and you a separate sheet to this formation. Describe Employment	ssible. If two married pec u are married and not fili our spouse is not filing w i. On the top of any additi	ng jointly, and your spouse is li ith you, do not include informational pages, write your name ar Debtor 1	and Debtor 2), both are equally responsible for ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse
Be a sup spo atta	as complete and accurate as poplying correct information. If you are separated and you have separated to this form the separate sheet to the separate sheet to the separate sheet	ssible. If two married pec u are married and not fili our spouse is not filing w n. On the top of any additi t	ng jointly, and your spouse is lith you, do not include informational pages, write your name are Debtor 1 Employed Not employed	and Debtor 2), both are equally responsible for ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filling spouse Employed Not employed
Be a sup spo atta	as complete and accurate as poplying correct information. If youse. If you are separated and you cha separate sheet to this form 1: Describe Employment	ssible. If two married pec u are married and not fili our spouse is not filing w i. On the top of any additi	ng jointly, and your spouse is li ith you, do not include informational pages, write your name ar Debtor 1	and Debtor 2), both are equally responsible for ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse
Be a sup spo atta	as complete and accurate as poplying correct information. If you are separated and you as separate sheet to this form 11: Describe Employment information. If you have more than one job, attach a separate page with information about additional	ssible. If two married pec u are married and not fili our spouse is not filing w n. On the top of any additi t	ng jointly, and your spouse is lith you, do not include informational pages, write your name are Debtor 1 Employed Not employed	and Debtor 2), both are equally responsible for ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filling spouse Employed Not employed
Be a sup spo atta	as complete and accurate as poplying correct information. If you see. If you are separated and you a separate sheet to this formation. The Describe Employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or	ssible. If two married pec u are married and not fili our spouse is not filing w n. On the top of any additi t Employment status Occupation Employer's name	ng jointly, and your spouse is li ith you, do not include informational pages, write your name ar Debtor 1 Employed Not employed Truck Driver	and Debtor 2), both are equally responsible for ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed Veterans Claims Examiner
Be a sup spo atta	as complete and accurate as poplying correct information. If you see. If you are separated and you a separate sheet to this formation. The Describe Employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include studer	ssible. If two married pec u are married and not fili our spouse is not filing w n. On the top of any additi t Employment status Occupation Employer's name	Debtor 1 Employed Not employed Truck Driver Prime Pallet 921 S. Cherokee Muskogee, OK 74403	and Debtor 2), both are equally responsible for ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filling spouse Debtor 2 or non-filling spouse

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. It you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2,968.33 4,673.28 2. deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 4. 2,968.33 \$ 4,673.28

Debtor 1 Debtor 2 David Curt McCoy

Jyll Rheannon McCoy

Case number (if known)

				For	Debtor 1		Debtor 2 or -filing spouse	
	Сору	line 4 here	4.	\$	2,968.33	\$	4,673.28	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	598.48	\$	1,703.37	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	188.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	128.18	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	159.73	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify: Garnishment	_ 5h.+	\$	0.00	+ \$	797.05	
6.	Add t	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	598.48	\$	2,976.33	
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,369.85	\$	1,696.95	
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	+ \$	0.00	
9.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.	Calcu	ulate monthly income. Add line 7 + line 9.	10. \$	2	2,369.85 + \$	1,6	696.95 = \$	4,066.80
	Add t	he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Includ other	all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your of friends or relatives. In this include any amounts already included in lines 2-10 or amounts that are not a lifty:	depen				Schedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$	4,066.80
13.	Do yo	ou expect an increase or decrease within the year after you file this form?	,				Combin monthly	
	_	No.						
		Yes. Explain:						

Fill	in this information to identify your case:			
	tor 1 David Curt McCoy	Cł	neck if this is:	
			An amended filing	
	tor 2 Jyll Rheannon McCoy			ving postpetition chapter
(Spo	buse, if filing)		13 expenses as of	the following date:
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF OKLAH	HOMA	MM / DD / YYYY	
	e number			
0	fficial Form 106J			
S	chedule J: Your Expenses			12/1
info	as complete and accurate as possible. If two married people at brmation. If more space is needed, attach another sheet to this nber (if known). Answer every question.	re filing together, both are e form. On the top of any add	qually responsible fo itional pages, write y	or supplying correct your name and case
Par 1.	Is this a joint case?			
•••	□ No. Go to line 2.			
	Yes. Does Debtor 2 live in a separate household?			
	·			
	■ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	s for Separate Household of D	ebtor 2.	
2.	Do you have dependents? ☐ No			
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the			□ No
	dependents names.	Daughter	1	Yes
		-		□ No
		Daughter	2	■ Yes
		C	0	□ No
		Son	9	Yes
		Son	14	□ No
				■ Yes □ No
		Son	21	■ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?			— 1es
Par	t 2: Estimate Your Ongoing Monthly Expenses			
exp app	imate your expenses as of your bankruptcy filing date unless y enses as of a date after the bankruptcy is filed. If this is a supp dicable date.	olemental <i>Schedule J</i> , check		
the	lude expenses paid for with non-cash government assistance i value of such assistance and have included it on Schedule I: Yicial Form 106I.)		Your exp	enses
4.	·	Include first mortgage		
4.	The rental or home ownership expenses for your residence. I payments and any rent for the ground or lot.	moluue mai mongage 4.	\$	1,500.00
	If not included in line 4:			
	4a. Real estate taxes	4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance	4b.	·	0.00
	4c. Home maintenance, repair, and upkeep expenses	4c.		20.00
	4d Homeowner's association or condominium dues	4d	\$	0.00

Official Form 106J

Schedule J: Your Expenses

5. Additional mortgage payments for your residence, such as home equity loans

Debtor 1 Debtor 2 David Curt McCoy

Jyll Rheannon McCoy

Case number (if known)

	tor 1 tor 2	David Curt McCoy Jyll Rheannon McCoy	Case num	ber (if known)	
6.	Utilit	ties:			
	6a.	Electricity, heat, natural gas	6a.	\$	300.00
	6b.	Water, sewer, garbage collection	6b.	\$	100.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		150.00
	6d.	Other. Specify:	6d.		0.00
7.		d and housekeeping supplies	7.		600.00
8.	_	dcare and children's education costs	8.	\$	0.00
9.		hing, laundry, and dry cleaning	9.	*	200.00
		onal care products and services	10.		40.00
		ical and dental expenses	11.	\$	400.00
12.		sportation. Include gas, maintenance, bus or train fare.	12.	\$	200.00
13		ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books	13.		50.00
		ritable contributions and religious donations	14.		0.00
		rance.	14.	Ψ	0.00
13.		ot include insurance deducted from your pay or included in lines 4 or 20.			
		Life insurance	15a.	\$	0.00
	15b.	Health insurance	15b.	\$	0.00
	15c.	Vehicle insurance	15c.	\$	210.00
	15d.	Other insurance. Specify:	15d.	\$	0.00
16.	Taxe Spec	es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify:	16.	\$	0.00
17.		allment or lease payments:			
		Car payments for Vehicle 1	17a.	·	140.00
	17b.	Car payments for Vehicle 2	17b.	\$	0.00
	17c.	Other. Specify:	17c.	\$	0.00
		Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report as		¢.	0.00
40	dedu	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	
19.		er payments you make to support others who do not live with you.	10	\$	0.00
20	Spec	त्रापृ. er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e	19.	ur Income	
20.		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.	·	0.00
		Property, homeowner's, or renter's insurance	20c.		0.00
		Maintenance, repair, and upkeep expenses	20d.		0.00
		Homeowner's association or condominium dues	20e.		0.00
21		er: Specify:	21.		0.00
	•				0.00
22.		ulate your monthly expenses			
		Add lines 4 through 21.		\$	3,910.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,910.00
22	Calc	ulate your monthly net income.			
۷٥.		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,066.80
		Copy your monthly expenses from line 22c above.	23b.		3,910.00
	200.	John Thomany oxponded from the 220 above.	۷۵۵.	Ψ	3,310.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	156.80
24.	For e	Tou expect an increase or decrease in your expenses within the year after your car loan within the year or do you expect you ideation to the terms of your mortgage? O.			rease or decrease because of a

Explain here:

☐ Yes.

Fill in thi	is information to identify your	case:		
Debtor 1				
Deblor	David Curt McCo	Middle Name	Last Name	
Debtor 2			Last Name	
(Spouse if, f	<u> </u>	Middle Name	Last Name	_
United St	tates Bankruptcy Court for the:	EASTERN DISTRICT	OF OKLAHOMA	
Case nur	mher			
(if known)				Check if this is an amended filing
	Form 106Dec aration About a	an Individua	l Debtor's Schedule	2S 12/15
	g money or property by fraud both. 18 U.S.C. §§ 152, 1341, Sign Below		nkruptcy case can result in fines up to	\$250,000, or imprisonment for up to 20
Did	you pay or agree to pay some	eone who is NOT an atto	orney to help you fill out bankruptcy fo	rms?
	No			
	Yes. Name of person			ach Bankruptcy Petition Preparer's Notice, claration, and Signature (Official Form 119)
	er penalty of perjury, I declare they are true and correct.	that I have read the sur	mmary and schedules filed with this de	eclaration and
x	/s/ David Curt McCoy		X /s/ Jyll Rheannon McC	Cov
	David Curt McCoy		Jyll Rheannon McCoy	
	Signature of Debtor 1		Signature of Debtor 2	
1	Date October 24, 2019		Date October 24, 201	9

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill	l in this inforr	nation to identify you	r case:			
De	btor 1	David Curt McCo		Loot Name		
De	btor 2	Jyll Rheannon M	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	OKLAHOMA		
Ca	se number					
	nown)				_	Check if this is an mended filing
						·
	fficial Fo		Affaire for lastini	landa Ellina (an B		
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19
nun	nber (if know	n). Answer every ques			y additional pages, write you	ır name and case
1.	•	r current marital statu	ıs?			
	■ Married □ Not mai					
2			lived enverbers other than	where you live new?		
2.	During the i	asi 3 years, nave you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>I</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory	
	■ No					
	■ No □ Yes. Ma	ake sure vou fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
		,	(0)	,		
Pa	rt 2 Explai	in the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
		I in the details.				
	_ 100.11	in the detaile.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$24,289.50	■ Wages, commissions, bonuses, tips	\$43,024.85
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)		■ Wages, commissions, bonuses, tips \$26,238.00		■ Wages, combonuses, tips	imissions,	\$52,085.00		
				☐ Operating a business		☐ Operating a	business	
		dar year bef December :		■ Wages, commissions, bonuses, tips	\$15,495.00	■ Wages, combonuses, tips	ımissions,	\$47,667.00
				☐ Operating a business		☐ Operating a	business	
;	and other winnings. List each s No	public benef If you are fili	it payments; ng a joint cas ne gross inco	er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separat	est; dividends; money collector received together, list it constituted together.	ted from lawsuits; only once under De	royalties; ar ebtor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Part	3: List	: Certain Pa	yments You	Made Before You Filed for I	Bankruptcy			
	□ No.	Neither De individual puring the No. Yes	shor 1 nor Derimarily for a 90 days before Go to line 7 List below e paid that create not include to adjustment of Debtor 2 or 90 days before Go to line 7 List below e include pay	each creditor to whom you pai editor. Do not include paymen payments to an attorney for the on 4/01/22 and every 3 years r both have primarily consure you filed for bankruptcy, di	d you pay any creditor a total d a total of \$6,825* or more in the formal days and the following the	I of \$6,825* or mo n one or more pay nations, such as ch or after the date of I of \$600 or more?	re? /ments and the support an	the total amount you and alimony. Also, do t.
	Creditor'	s Name and	l Address	Dates of payme	nt Total amount	Amount you still owe	Was this	payment for

Debtor 2			Cas	se number (if known)	
<i>Insi</i> of w a b	thin 1 year before you filed for bankrup iders include your relatives; any general p which you are an officer, director, person in usiness you operate as a sole proprietor. nony.	artners; relatives of any gencontrol, or owner of 20%	neral partners; partnor or more of their votin	erships of which y g securities; and a	ou are a general բ any managing age	partner; corporation ent, including one fo
■	No Yes. List all payments to an insider.					
Ins	sider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	is payment
ins	chin 1 year before you filed for bankrup ider? lude payments on debts guaranteed or co		yments or transfer	any property on a	account of a deb	t that benefited an
	No					
	Yes. List all payments to an insider					
Ins	sider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include creditor	
Part 4:	Identify Legal Actions, Repossession	ns, and Foreclosures				
List	thin 1 year before you filed for bankrup all such matters, including personal injury difications, and contract disputes. No Yes. Fill in the details.					
	se title se number	Nature of the case	Court or agency		Status of the	case
Au LL vs Da Jy	uto Advantage Finance of Tulsa, .C	Civil Suit for Money and Garnishment	District Court County 500 S. Denver Tulsa, OK 7410		☐ Pending ☐ On appeal ■ Concluded	
	thin 1 year before you filed for bankrup eck all that apply and fill in the details belo		perty repossessed,	foreclosed, garni	shed, attached,	seized, or levied?
■	No. Go to line 11. Yes. Fill in the information below.					
Cr	editor Name and Address	Describe the Property		Date	•	Value of the property
50	strict Court of Tulsa County	Explain what happene Wages for Debtor 2 Affairs		•	/ 2019 - sent	\$4,245.39
Τι	ılsa, OK 74103	☐ Property was reposs☐ Property was forecld				
		■ Property was garnish				
		☐ Property was attache	ed, seized or levied.			
	thin 90 days before you filed for bankru counts or refuse to make a payment bed No Yes. Fill in the details.		cluding a bank or fi	nancial institutio	n, set off any am	ounts from your
Cr	editor Name and Address	Describe the action th	e creditor took	Date take	action was	Amount
				take		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

	otor 1 David Curt McCoy Otor 2 Jyll Rheannon McCoy	Case number	(if known)				
12.	Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or an No Yes	r, was any of your property in the possession of an another official?	assignee for the bene	efit of creditors, a			
Par							
	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No						
	Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift or contr	cy, did you give any gifts or contributions with a totalibution.	al value of more than	\$600 to any charity?			
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value			
Par							
15.	Within 1 year before you filed for bankruptcy or gambling? No Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of the	t, fire, other disaster,			
	how the loss occurred Inc	scribe any insurance coverage for the loss lude the amount that insurance has paid. List pending	Date of your loss	Value of property lost			
	ins	urance claims on line 33 of Schedule A/B: Property.					
Par 16.	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or prepared include any attorneys, bankruptcy petition prepared in No Yes. Fill in the details. Person Who Was Paid Address	n, did you or anyone else acting on your behalf pay of paring a bankruptcy petition? arers, or credit counseling agencies for services required Description and value of any property transferred	d in your bankruptcy. Date payment or transfer was	rty to anyone you Amount of payment			
	Email or website address Person Who Made the Payment, if Not You	Attauran Fara of \$4000.00 L. \$605.00	made	#4 00F 00			
	Guinn Law Office 904 Erie Street Muskogee, OK 74403 pguinnsr@suddenlink.net	Attorney Fees of \$1000.00 plus \$335.00	10/24/2019	\$1,335.00			

17.	promised to help you deal with your cree Do not include any payment or transfer that No	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.							
	☐ Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value of any property transferred			У	Date payment or transfer was made		Amount of payment
18.	transferred in the ordinary course of you Include both outright transfers and transfers	ears before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyon the ordinary course of your business or financial affairs? In outright transfers and transfers made as security (such as the granting of a security interest or mortgages and transfers that you have already listed on this statement.							
			5					. .	
	Person Who Received Transfer Address Person's relationship to you		Description and very property transfer			payment	e any property or is received or debts xchange	made	transfer was e
	reison's relationship to you								
19.	Within 10 years before you filed for bank beneficiary? (These are often called asset No			y property to a	self	-settled t	rust or similar device	of whic	ch you are a
	☐ Yes. Fill in the details.								
	Name of trust Description and value of the property transferred							Date	Transfer was
Par	rt 8: List of Certain Financial Accounts	, Instrur	nents, Safe Deposi	t Boxes, and St	orag	je Units			
20.	Within 1 year before you filed for bankru sold, moved, or transferred? Include checking, savings, money mark houses, pension funds, cooperatives, as No Yes. Fill in the details.	et, or otl	ner financial accou	nts; certificates	of c				
				T (Data assessmt was		1 1 1 - 1
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		st 4 digits of count number	Type of accordinstrument	unt c	c m	ate account was losed, sold, noved, or ransferred	bef	Last balance ore closing or transfer
21.	Do you now have, or did you have within cash, or other valuables?	n 1 year	before you filed for	bankruptcy, a	ny sa	afe depos	sit box or other depos	itory fo	or securities,
	■ No □ Yes. Fill in the details.								
								you still ve it?	
22.	Have you stored property in a storage u	nit or pla	ace other than your	home within 1	yea	r before y	ou filed for bankrupto	cy?	
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Cod	e)	Who else has or I to it? Address (Number, S State and ZIP Code)		Des	scribe the	e contents		o you still eve it?

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Par	t 9:	Identify Property You Hold or Control for S	Someone Else						
23.		you hold or control any property that someon someone.	ne else owns? Include any proper	rty y	ou borrowed from, are storing fo	r, or hold in trust			
		No Yes. Fill in the details.							
		vner's Name Idress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value			
Par	t 10	Give Details About Environmental Informa	ation						
or t	he	purpose of Part 10, the following definitions	apply:						
	tox	vironmental law means any federal, state, or lic substances, wastes, or material into the ai ulations controlling the cleanup of these sub	r, land, soil, surface water, ground	_	• •				
		e means any location, facility, or property as o own, operate, or utilize it, including disposal s	•	law	, whether you now own, operate,	or utilize it or used			
		zardous material means anything an environr ardous material, pollutant, contaminant, or s		s wa	aste, hazardous substance, toxic	substance,			
Rер	ort a	all notices, releases, and proceedings that yo	ou know about, regardless of whe	n th	ey occurred.				
24.	Has	s any governmental unit notified you that you	ı may be liable or potentially liable	e un	der or in violation of an environm	ental law?			
		No							
		Yes. Fill in the details.							
		ime of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice			
25.	Hav	ve you notified any governmental unit of any	release of hazardous material?						
		No							
		Yes. Fill in the details.							
	_	ime of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice			
26.	Hav	ve you been a party in any judicial or adminis	strative proceeding under any env	iron	mental law? Include settlements	and orders.			
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case			
Par	t 11	Give Details About Your Business or Con	nections to Any Business						
27.	Wit	hin 4 years before you filed for bankruptcy, d	did you own a business or have ar	ny o	f the following connections to an	y business?			
		☐ A sole proprietor or self-employed in a to	rade, profession, or other activity,	, eitl	her full-time or part-time				
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
		☐ An officer, director, or managing executive of a corporation							
		☐ An owner of at least 5% of the voting or	equity securities of a corporation	ı					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

	btor 1 David Curt McCoy btor 2 Jyll Rheannon McCoy		Ca	ase number (if known)
	■ No. None of the above applies. Go to	Part 12.		
	☐ Yes. Check all that apply above and fi	ill in the details be	elow for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)		ature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties. No Yes. Fill in the details below.	otcy, did you give	a financial statement to a	nyone about your business? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
hav				declare under penalty of perjury that the answers
with	n a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571.			
/s/	David Curt McCoy	/s/ Jy	I Rheannon McCoy	
	vid Curt McCoy nature of Debtor 1		heannon McCoy cure of Debtor 2	
Dat	te October 24, 2019	Date	October 24, 2019	
Did∶ ■ N □ Y		nent of Financial i	Affairs for Individuals Filin	ng for Bankruptcy (Official Form 107)?
Did∶	you pay or agree to pay someone who is no	ot an attorney to I	nelp you fill out bankruptc	y forms?
ΠY	es. Name of Person Attach the Bankr	ruptcy Petition Prep	parer's Notice, Declaration, a	and Signature (Official Form 119).

Fill in this inform			
	nation to identify your case:		
Debtor 1	David Curt McCoy First Name Middle	Name Last Name	
Debtor 2 (Spouse if, filing)	Jyll Rheannon McCoy First Name Middle	e Name Last Name	
United States Ba	nkruptcy Court for the: EASTERN	N DISTRICT OF OKLAHOMA	
Case number			
(if known)		_	☐ Check if this is an amended filing
Official Fo	rm 108		
Statemer	nt of Intention for I	ndividuals Filing Under Chapte	er 7 12/15
	vidual filing under chapter 7, you is		
■ you have leas You must file this	ed personal property and the leas s form with the court within 30 day over is earlier, unless the court exte	•	
	cople are filing together in a joint c	ase, both are equally responsible for supplying correct i	nformation. Both debtors must
	and accurate as possible. If more s our name and case number (if kno	space is needed, attach a separate sheet to this form. On own).	the top of any additional pages,
Part 1: List Yo	our Creditors Who Have Secured C	Claims	
			ty (Official Form 105D) fill in the
information be	elow.	edule D: Creditors Who Have Claims Secured by Propert	
Identify the cre	editor and the property that is collate	eral What do you intend to do with the property tha secures a debt?	as exempt on Schedule C?
Creditor's R name:	ed River Credit Corp	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property	2007 Nissan Titan PU 157000 miles	Retain the property and enter into a **Reaffirmation Agreement.** Retain the property and [explain]:	■ Yes
securing debt:		Trotain the property and jexplaing.	_
Part 2: List Yo	our Unexpired Personal Property L	03505	
For any unexpire in the informatio	ed personal property lease that you n below. Do not list real estate lea	u listed in Schedule G: Executory Contracts and Unexpir ises. Unexpired leases are leases that are still in effect; the lease if the trustee does not assume it. 11 U.S.C. § 365(p)	he lease period has not yet ended.
Describe your u	nexpired personal property leases	\$	Will the lease be assumed?
Lessor's name:			□ No
Description of lea Property:	ased		☐ Yes
Lessor's name: Description of lea	ased		□ No
Property:			☐ Yes
Lessor's name:			
Official Form 108	Stateme	ent of Intention for Individuals Filing Under Chapter 7	page 1

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Best Case Bankruptcy

Deb		Pavid Curt McCoy yll Rheannon McCoy			Case number (if known)		
	cription c perty:	of leased					No Yes
Des	sor's nam cription c perty:						No Yes
Des	sor's nam cription o perty:						No Yes
Des	sor's nam cription coerty:						No Yes
Des	sor's nam cription c perty:						No Yes
	er penalt	gn Below y of perjury, I declare that I have it is subject to an unexpired lease.		·	/ property of my estate that se	cur	es a debt and any personal
^	David	Curt McCoy re of Debtor 1		Jyl	I Rheannon McCoy nature of Debtor 2		
	Date	October 24, 2019	Da	ite	October 24, 2019		

Statement of Intention for Individuals Filing Under Chapter 7

page 2

Eill :	n this information to identify your agas:								
	n this information to identify your case:				eck on 2A-1Su		irected	in this form and	in Form
Deb	tor 1 David Curt McCoy				-A-100	ipp.			
1	tor 2 Jyll Rheannon McCoy			'	■ 1. T	here is no presi	umptior	n of abuse	
Linit	ed States Bankruptcy Court for the: Eastern District of	Oklaho	ma	1				mine if a presum	•
Offic	ed States Bankruptcy Court for the. Lastern District of	Okiaiio	Ша					nder <i>Chapter 7 \</i>	lleans Test
	e number			.		Calculation (Offi		,	
(if kno	wn)							ot apply now be	
								e but it could ap	oly later.
					☐ Ch	eck if this is a	n ame	nded filing	
Off	<u>icial Form 122A - 1</u>								
Ch	apter 7 Statement of Your Cur	rent	Mor	nthly Inc	omo	е			12/15
attacl case	complete and accurate as possible. If two married people as has separate sheet to this form. Include the line number to wonumber (if known). If you believe that you are exempted from fying military service, complete and file Statement of Exempter Calculate Your Current Monthly Income	hich the	e additior sumption	nal information a of abuse becau	pplies. se you	On the top of ar	ny addit narily co	ional pages, write onsumer debts o	e your name and because of
1.	What is your marital and filing status? Check one on	ıly.							
	□ Not married. Fill out Column A, lines 2-11.								
	■ Married and your spouse is filing with you. Fill ou	ıt both (Columns	A and B, lines	2-11.				
	☐ Married and your spouse is NOT filing with you.	You an	d your s	spouse are:					
	☐ Living in the same household and are not lega	lly sep	arated.	Fill out both Col	lumns .	A and B, lines 2	2-11.		
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading	egally s	eparated	d under nonban	kruptcy	/ law that applie	es or th		
10 th	ill in the average monthly income that you received from all sold (10A). For example, if you are filing on September 15, the 6-me 6 months, add the income for all 6 months and divide the total bouses own the same rental property, put the income from that p	onth per by 6. Fil	riod would II in the re	be March 1 throusult. Do not include	igh Aug de any ir	ust 31. If the amo	ount of your	our monthly incom once. For exampl	e varied during e, if both
					Colun			mn B or 2 or filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime,	and co	mmissio	ons (before all		0.000.00		4.074.00	
	payroll deductions).				\$	2,968.33	\$	4,671.33	
	Alimony and maintenance payments. Do not include Column B is filled in.	. ,		·	\$	0.00	\$	0.00	
4.	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Include d, your o	e regular depende	contributions nts, parents,	\$	0.00	\$	0.00	
5.	Net income from operating a business, profession,	or farm							
		•		tor 1					
	Gross receipts (before all deductions)	\$_	0.00						
	Ordinary and necessary operating expenses	- \$ _	0.00		_		_		
	Net monthly income from a business, profession, or farm	m \$	0.00	Copy here ->	\$	0.00	\$	0.00	
6.	Net income from rental and other real property			14					
		•		tor 1					
	Gross receipts (before all deductions)	\$_	0.00						
	Ordinary and necessary operating expenses	-\$_	0.00	0	Φ.	0.00	œ.	0.00	
1	Net monthly income from rental or other real property	\$	U.UU	Copy here ->	Ф	0.00	\$	0.00	

Net monthly income from rental or other real property

0.00

7. Interest, dividends, and royalties

0.00

							Colui Debt				or 2 or	pouse	
8.	Unem	ploym	nent compensation				\$		0.00	\$		0.00	
			the amount if you contend that the amoun ecurity Act. Instead, list it here:	t received was a	bene	fit under							
	For	you	\$		0.	00							
	For	your s	spouse\$		0.	00							
9.	Pension	on or	retirement income. Do not include any and rethe Social Security Act.	nount received the	hat wa	is a	\$		0.00	\$		0.00	
10.	Do not receive	included as a stic ter	n all other sources not listed above. Specte any benefits received under the Social Sa victim of a war crime, a crime against hur rorism. If necessary, list other sources on a	Security Act or pananity, or internate separate page	aymer ationa	nts I or	œ.		0.00	¢		0.00	
		•					\$		0.00	\$		0.00	
		_					\$		0.00	\$		0.00	
		Tota	al amounts from separate pages, if any.			+	\$		0.00	\$		0.00	
11.			our total current monthly income. Add ling in the nadd the total for Column A to the to			\$	2,968	.33	+ \$_	4,671.	33	= \$	7,639.66
Part	2:	Deter	rmine Whether the Means Test Applies t	o You								incom	current monthly e
12.	Calcul	ate yo	our current monthly income for the year	. Follow these st	teps:								
	12a. C	ору у	our total current monthly income from line	11				Cop	y line 11	here=>		\$	7,639.66
	M	lultiply	by 12 (the number of months in a year)									X	
	12b. T	he res	sult is your annual income for this part of th	e form							12b.	\$	91,675.92
13.	Calcul	late th	ne median family income that applies to	you. Follow thes	se ste	os:							
	Fill in t	he sta	ate in which you live.	ОК									
	Fill in t	he nu	mber of people in your household.	7									
	To find	l a list	edian family income for your state and size of applicable median income amounts, go . This list may also be available at the bank	online using the		pecified	in the	separa	ate instru	ctions	13.	\$ <u>1</u>	01,341.00
14.	How d	lo the	lines compare?										
	14a.		Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of pag	e 1, cł	neck box	1, <i>The</i>	ere is i	no presur	nption of	f abuse) .	
	14b.		Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check	box 2	, The pr	esump	tion of	f abuse is	determi	ned by	Form 1	22A-2.
Part	3:	Sign	Below										
	В	y sign	ing here, I declare under penalty of perjury	that the informa	ation o	n this sta	atemer	t and	in any att	achment	ts is tru	ue and c	orrect.
	v	lel D	David Curt McCoy		v	le/ Ivili	Dhoai	non	McCoy				
	^		id Curt McCoy			Jyll Rh							
			ature of Debtor 1			Signatur							
	Date		ober 24, 2019 / DD / YYYY			Octobe					_,		
	If		hecked line 14a, do NOT fill out or file Forr	n 122A-2.									
		•	hecked line 14b, fill out Form 122A-2 and f		m.								
		,											

Official Form 122A-1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Document

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Document

United States Bankruptcy Court Eastern District of Oklahoma

In re	David Curt McCoy Jyll Rheannon McCoy		Case No.		
	<u>-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR DE	BTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) ompensation paid to me within one year before the filing the rendered on behalf of the debtor(s) in contemplation of the debtor(s).), I certify that I am the attor of the petition in bankruptcy	rney for the above nam	ed debtor(s) and that to me, for services rende	ered or to
	For legal services, I have agreed to accept		\$	0.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due			0.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. 7	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
1.	■ I have not agreed to share the above-disclosed compen	sation with any other person	n unless they are memb	ers and associates of my	law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				firm. A
5.	n return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspec	ets of the bankruptcy c	ase, including:	
8	. [Other provisions as needed]				
5. I	By agreement with the debtor(s), the above-disclosed fee d	loes not include the followin	ng service:		
		CERTIFICATION			
	certify that the foregoing is a complete statement of any analyst proceeding.	agreement or arrangement fo	or payment to me for re	presentation of the debto	or(s) in
0	ctober 24, 2019	/s/ Patrick G. Gu			_
D	nte	Patrick G. Guinn Signature of Attorn			
		Signature of Attorn	ie y		
		Guinn Law Offic			
		Guinn Law Offic 904 Erie Street	e		
		Guinn Law Offic 904 Erie Street Muskogee, OK 7	e 74403		
		Guinn Law Offic 904 Erie Street Muskogee, OK 7	e /4403 ax: 918-532-6377		

United States Bankruptcy Court Eastern District of Oklahoma

In re	David Curt McCoy Jyll Rheannon McCoy		Case No.	
		Debtor(s)	Chapter	7
	VERIF	TICATION OF CREDITOR M	IATRIX	
The ab	ove-named Debtors hereby verify that	t the attached list of creditors is true and corn	rect to the best	of their knowledge.
Date:	October 24, 2019	/s/ David Curt McCoy		
		David Curt McCoy		
		Signature of Debtor		
Date:	October 24, 2019	/s/ Jyll Rheannon McCoy		
		Jyll Rheannon McCoy		
		Signature of Debtor		

A, T & T PO Box 5014 Carol Stream, IL 60197

A, T & T Mobility PO Box 537104 Atlanta, GA 30353

Acceptance Now 5501 Headquaters Dr Plano, TX 75024

Acima Credit 9815 S. Monroe Street, 4th Floor Sandy, UT 84070

Advanced Collection PO Box 560063 Rockledge, FL 32956

AFNI PO Box 3517 Bloomington, IL 61702

AFNI PO Box 3517 Bloomington, IL 61702

Approved Cash Advance 2238 Shawnee Blvd Muskogee, OK 74403

Approved Cash Advance.2 2238 Shawnee Blvd Muskogee, OK 74403

ARSTRAT, LLC PO Box 790113 Saint Louis, MO 63179

Arvest Bank PO Box 1670 Lowell, AR 72745

Auto Advantage Finance PO Box 96329 Oklahoma City, OK 73143

Capital Accounts PO Box 140065 Nashville, TN 37214

City of Muskogee City Hall Muskogee, OK 74402 City of Muskogee (American Municipal Ser PO Box 118312 Carrollton, TX 75011

CMRE Financial Services, Inc. 3075 Imperial Hwy, Ste. 200 Brea, CA 92821-6753

Commerce Finance 907A N. York Street Muskogee, OK 74403

Commerce Finance.2 907A N. York Street Muskogee, OK 74403

Credence Resource Management LLC PO Box 2390 Southgate, MI 48195

Dillards - Wells Fargo Bank PO Box 660553 Dallas, TX 75266-0553

EMP of Tulsa County, PLLC PO Box 14099 Belfast, ME 04915

EOS CCA 700 Longwater Drive Norwell, MA 02061

EOS CCA PO Box 981008 Boston, MA 02298

ERC PO Box 57547 Jacksonville, FL 32241

Eric Massad, DDS 2404 Old Shawnee Road Muskogee, OK 74403

GLOBAL RECEIVABLES SOLUTIONS PO BOXD 790113 Saint Louis, MO 63179

Globe Acceptance 3410 Merle Hay Road Des Moines, IA 50310

GM Financial PO Box 182963 Arlington, TX 76096 GREEN COUNTRY EMERG PHYS GROUP TULSA PO Box 21050, Dept 201 Tulsa, OK 74121

John Belk, MD 1103 W. Cherokee Wagoner, OK 74467

Medical Billing Solutions PO Box 1919 Tulsa, OK 74101

Medical Revenue Service PO Box 1149 Sebring, FL 33871

Medicare Premium Collection Center PO Box 790355 Saint Louis, MO 63179

Muskogee Regional Medical Center PO Box 290429 Nashville, TN 37229

Muskogee Regional Medical Center PO Box 740757 Cincinnati, OH 45274

Nehemiah Homes 806 N. 24th Street Muskogee, OK 74401

Nelnet PO Box 82561 Lincoln, NE 68501

NPAPS, INC/EASTSTAR PO BOX 740757 Cincinnati, OH 45274

Oklahom Tax Commission 2501 North Lincoln Oklahoma City, OK 73194

Portfolio Recovery Associates, LLC PO Box 12914 Norfolk, VA 23541

RECEIVABLE MANAGEMENT GROUP INC 2901 University Ave. #29 Columbus, GA 31907

Red River Credit Corp 520 N. Main Street Muskogee, OK 74401 Regional Acceptance Co. 9636 N. May Street, Ste. 200 Oklahoma City, OK 73120

Robinson, Hoover and Fudge 119 N. Robinson, Ste. 1000 Oklahoma City, OK 73102

Saint Francis Health Systems PO Box 707001 Tulsa, OK 74170-7001

Saint Francis Health Systems PO Box 707001 Tulsa, OK 74170-7001

Saint Francis Hospital Muskogee 300 Rockefeller Drive Muskogee, OK 74401

Saint Francis Hospital Muskogee PO Box 290429 Nashville, TN 37229-0429

Silverscript Insurance Company PO Box 504849 Saint Louis, MO 63150

Social Security Administration Mid-America Program Service Center 601 East Twelfth Kansas City, MO 64106

Southwest Credit Systems, LP PO Box 650543 Dallas, TX 75265

Spectrum Imaging PLLC PO Box 21228, Dept. 130 Tulsa, OK 74121-1228

Sun Loans 2421 S. York Street, Ste. 6 Muskogee, OK 74403

Sun Loans 361 S. Frontage Road Pahrump, NV 89048

Tab Services 2448 E. 81st Street, Ste. 4700 PO Box 52039 Tulsa, OK 74152-0039 US Cellular C/O Debt Recovery Solutions 900 Merchants Concourse Westbury, NY 11590

US Cellular Dept 0205 Palatine, IL 60055

Vengroff Williams, Inc. PO Box 4155 Sarasota, FL 34230

Vital Recovery Services PO Box 923748 Norcross, GA 30010

Works & Lentz 1437 s Boulder stse s900 Tulsa, OK 74119